PART B - FEE(S) TRANSMITTAL

Compage and send this form, together with applicable fec(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate all further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as the property of the current correspondence address as the property of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a patent of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a patent of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a patent of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a patent of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a patent of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a patent of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a patent of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a patent of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a patent of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a patent of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a patent of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a patent of the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for a patent of the current correspondence address; and a patent of the current correspondence address and a patent of the current ance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any chappe of address)

03/05/2007

ZIOLKOWSKI PATENT SOLUTIONS GROUP, SC (GEMS) 136 S WISCONSIN ST PORT WASHINGTON, WI 53074

Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Feets) Transmittal is being deposited with the United
States Postal Service with sufficient postage for first class mail in an envelope
addressed to the Mail Stop ISSUE FEE address above, or being facsimile
transmitted to the USPTO (571) 273-2885, on the date indicated below.

Robyn L. Templin	(Depositor's name)
Robert R. Templin	(LyrotsagiZ)
3/22/07	(Date)

APPLICATION NO.	PILING DATE	FIRST NAMED INVENTOR	ATTORNÉY DOCKET NO.	CONFIRMATION NO.
09/683.561	01/18/2002	Winnie C Durbin	GEM\$8081 123	1736

TITLE OF INVENTION: MITHOD AND SYSTEM TO GRANT ACCESS TO SOFTWARE OPTIONS RESIDENT ON A MEDICAL IMAGING DEVICE

APPLN. TYPE	SMALL ENTITY	issue fee due	PUBLICATION FEE DUB	PREV. PAID ISSUE MIE	TOTAL PER(S) DUR	DATE OUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	06/05/2007
6xA)	niner	ART UNIT	CLASS-SUBCLASS			
SIMITOSKI	, MICHAEL J	2134	713-100000			•
CFR 1.363). Change of corresp Address form PYO/S	tence address or indication condunce address (or Cha B/122) attached. dication (or "Pee Address' 02 or more recent) attach	nge of Correspondence	or agents OR, alternative (2) the name of a single	3 registered patent attorn	eys Group, SC	Patent Solutions Della Penna rton
	less an assignee is identi	fied below, no assignee	THE PATENT (print or type data will appear on the pa	itent. If an assignee is id:	entified below, the docur	mont has been filed for
(A) NAME OF ASSI	•	netion of this form is 140		•	%%7 HDF#FSS2 00000	0081 070845 0968
(A) NAME OF ASSI	•		(B) RESIDENCE: (CITY Pewaukee, W.	and STATE OR GOLDAND O1 FC:1	501 1400.00	DA
(A) NAME OF ASSI GE Medica	GNEE .	rvices, Inc.	(B) RESIDENCE: (CITY Pewaukee, W.	and STATE OR GOLDINE	501 1400.00	DA
(A) NAME OF ASSI GE Medic: lease check the appropr The following fee(s) State Fee	ONEE al Technology Sel iate assignee category or are submitted: fo small entity discount pr	rvices, Inc. categories (will not be p	(B) RESIDENCE: (CITY Pewaukee, W.	and STATE OR COVERTE 01 FC:1 Individual St Corporation is first reapply any previ	501 1400.00 on or other private group ously paid issue fee show	DA entity Government wn above)
(A) NAME OF ASSI GE Medic: Case check the appropriate following fee(s) So Issue Fee Publication Fee (North Advance Order - Change in Entity Sta	GNEE al Technology Sel iate assignee category or are submitted: fo small entity discount pr frof Copies tus (from status indicated	rvices, Inc. categories (will not be p 4 ermitted) above)	(B) RESIDENCE: (CITY Pewaukee, W. rinted on the patent): b. Payment of Fee(s): (Picas A check is enclosed. Payment by credit card The Director is horeby overpayment, to Depos	ond STATE OR COVERTE O1 FC:1 Individual St Corporation of first reapply any previous first reapply and first reapply any previous first reapply any previous first reapply and first reapply and first reapply any previous first reapply and first r	501 1400.00 on or other private group outly paid issue fee show thed. course fee(s), any deficie	DA entity Government wn above) ency, or credit any (ra copy of this form).
(A) NAME OF ASSI GE Medic: case check the appropriate of the case of the c	GNEE al Technology Seriate assignee category or are submitted: fo small entity discount pr frof Copies tus (from status indicated s SMALL ENTITY status	entegories (will not be p dermitted) above) s. Seo 37 CFR 1.27.	(B) RESIDENCE: (CITY Pewaukee, W. rinted on the patent): b. Payment of Fee(s): (Pleas A check is enclosed. Payment by credit card The Director is horeby averpayment, to Depos b. Applicant is no long	and STATE OR COVERED OF FC:1 Individual St Corporation of first reapply any provious first reapply and first reapply and first reapply any provious first reapply and first r	501 1400.00 on or other private group outly paid issue fee show thed. coping fee(s), any deficie 0345 (enclose an ex-	DA entity Government wn above) ency, or credit any (ra copy of this form).
(A) NAME OF ASSI GE Medic: case check the appropriate following fee(s) Stance Fee Publication Fee (North Advance Order - Change in Entity State a. Applicant claim	GNEE al Technology Seriate assignee category or are submitted: fo small entity discount pr frof Copies tus (from status indicated s SMALL ENTITY status	entegories (will not be p dermitted) above) s. Seo 37 CFR 1.27.	(B) RESIDENCE: (CITY Pewaukee, W. rinted on the patent): b. Payment of Fee(s): (Picas A check is enclosed. Payment by credit card The Director is horeby overpayment, to Depos	and STATE OR COVERED OF FC:1 Individual St Corporation of first reapply any provious first reapply and first reapply and first reapply any provious first reapply and first r	501 1400.00 on or other private group outly paid issue fee show thed. coping fee(s), any deficie 0345 (enclose an ex-	DA entity Government wn above) ency, or credit any (ra copy of this form).
(A) NAME OF ASSI GE Medic: case check the appropriate of the case of the c	GNEE al Technology Sel riate assignce category or are submitted: lo small entity discount pr the of Copies tus (from status indicated as SMALL ENTITY status de Publication Fee (if requirecords of the United State	entegories (will not be p dermitted) above) s. Seo 37 CFR 1.27.	(B) RESIDENCE: (CITY Pewaukee, W. rinted on the patent): b. Payment of Fee(s): (Pleas A check is enclosed. Payment by credit card The Director is horeby averpayment, to Depos b. Applicant is no long	and STATE OR COVERED OF FC:1 Individual St Corporation of first reapply any provious first reapply and first reapply and first reapply any provious first reapply and first r	501 1400.00 on or other private group ously paid issue fee show the discussion of the feet show the fe	DA entity Government wn above) ency, or credit any (ra copy of this form).

submitting the completed application form to the USPTO. The will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FBES OR COMPLETED PORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTOL-35 (Rev. 07/06) Approved for use through 04/30/2007.

. QMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE



Patent Attorney Docket No. GEMS8081.123

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Durbin et al.

Serial No.

09/683,561

Filed

1/18/2002

For

METHOD AND SYSTEM TO GRANT

ACCESS TO SOFTWARE OPTIONS RESIDENT ON A MEDICAL IMAGING

DEVICE

Group Art No.

2134

Examiner

Michael J. Simitoski

CERTIFICATION UNDER 37 CFR 1.8(a) and 1.10

I hereby certify that, on the date shown below, this correspondence is being:

deposited with the US Postal Service in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

37 CFR 1.8(a)

Transmission

transmitted by facsimile to Fax No.: (571) 273-2885 addressed to the Patent and Trademark Office.

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

COMMENTS ON STATEMENT OF REASONS FOR ALLOWANCE

Dear Sir:

Responsive to the Notice of Allowability mailed May 5, 2007, Applicant submits the following remarks responsive to the Examiner's Statement of Reasons for Allowance.



U.S. Serial No. 09/683,561

REMARKS

In response to the Examiner's Reasons for Allowance, Applicant believes that a separate Statement of Reasons for Allowance is unnecessary in the present case as the file history sufficiently sets forth the patentable distinctions of claims 1-13, 15, 16, 22 and 24-34.

The patentability of claims 1-13, 15, 16, 22 and 24-34 lies in each claim as a whole. That is, a single particular element or feature of a claim does not define the claim's patentability, but rather, it is the combination of elements and the interconnection therebetween that define the invention. The claims cannot be considered to be limited in scope based on this brief statement by the Examiner. Applicant stands by its position previously set forth in the file history.

Applicant does not acquiesce to the accuracy of the Examiner's statements in the Reasons for Allowance nor the Examiner's partial paraphrasing of the claim elements.

Entry of these remarks is appreciated and Applicant cordially invites the Examiner to respond, should the Examiner disagree.

Respectfully submitted,

Registration No. 38,368 Direct Dial (262) 268-8181

tjz@zpspatents.com

Dated:

Attorney Docket No.: GEMS8081.123

P.O. ADDRESS:

Ziolkowski Patent Solutions Group, SC 136 South Wisconsin Street Port Washington, WI 53074

262-268-8100